## New York State Recommended Childhood and Adolescent Immunization Schedule

A check  $\checkmark$  means that this is the earliest and best time for your child to be immunized. If your child misses the "best time" for vaccination, he or she should still be immunized as quickly as possible. Ask your doctor about getting your child caught up.

	Age							
Vaccine against:	Birth	2 months	4 months	6months	12 months	18-24 months	4-6 years	11-12 years
Hepatitis A					✓	✓		
Hepatitis B	✓	✓1-4 mo.		√6-18 mo.	Recommende	ed for any child not previou	patitis B Virus	
Diphtheria, Tetnus, Pertusis (DtaP)		✓	✓	✓	✓12-18 mo.		✓	
Haemophilus influenzae type b (Hib)		✓	✓	✓	√12-15 mo.			
Polio (IPV)		✓	✓	<b>√</b> 6-18 mo.			✓	
Pheumococcal Disease (PCV7)1		✓	✓	✓	√12-15 mo.	Ask your doctor if you	r should get vaccinated	
Measles, Mumps, Rubella (MMR)					✓12-15 mo.		✓	
Varicella (Chickenpox)					✓12-15 mo.		✓	A second catch-up dose is recommended for any child who has had only one dose.
Rotavirus		✓	✓	✓				
Tetanus, Diphtheria, Pertussis (Tdap)								✓11-18 yrs.
Meningococcal Disease (MCV4)2						Ask your doctor if your child 2 years old or older should get vaccinated with MCV4. <sup>2</sup>		✓
Human Papillomavirus (HPV)								√3
Influenza				Recommended yearly for all children aged 6 months and older. Ask your doctor if your child should receive one or two doses.				

<sup>&</sup>lt;sup>1</sup>PCV7 = Pheumonococcal Conjugate Vaccine: PPV23 = Pneumonococcal Polysaccharide Vaccine

<sup>&</sup>lt;sup>2</sup>MCV4= Meningococal Conjugate Vaccine

<sup>&</sup>lt;sup>3</sup> The HPV vaccine is given through a series of three shots over a 6-month period